

FAA Western Pacific Region AIP Regional Guidance for

Airport Improvement Program Projects

Subject: Project Application Date 5/5/97

1. General

This regional guidance provides electronic copies of the project application forms. The forms are saved in Word 6.0 format. Consult the appropriate FAA person for hard copies of the original forms. These forms include the following:

- a) Standard Form 424
- b) FAA Form 5100-100
 - i) Part II
 - a) Section A
 - b) Section C
 - ii) Part III
 - a) Section A
 - b) Section B
 - c) Section C
 - d) Section D
 - e) Section E
 - iii) Part IV

2. Reference(s)

FAA Order 5100.38A

3. FAA Coordination

Coordinate with appropriate personnel from the Airport Division.

				ON	IB Approval No 0348-0043
APPLICATION F	OR	2. DATE SUBMITTED		Applicant Identifier	
FEDERAL ASSIS	STANCE				
1. TYPE OF SUBMISSION		3. DATE RECEIVED BY	Y STATE	State Application Identifier	
Application ☐ Construction	Preapplication Construction	4. DATE RECEIVED B	Y AGENCY	Federal Identifier	
☐ Non-Construction	☐ Non-Construction				
5. APPLICANT INFORMATION	- Non Construction				
Legal Name:			Organizational Ur	nit:	
Address (give city, county, s	state and zip code):		Name and telephoral this application (g	one of the person to be contac give area code)	eted on matters involving
6. EMPLOYER IDENTIFICATIO	N NUMBER (EIN):		7. TYPE OF APPLIC	CANT: (enter appropriate letter	in box)
8. TYPE OF APPLICATION New	Ä Continuation	Revision	A. State B. County C. Municipal D. Township E. Interstate	H. Independent School DI. State Controlled InstitutJ. Private UniversityK. Indian TribeL. Individual	
→ New	- Continuation	- Revision	F. Intermunicipal		
If Revision, enter appropriate	` ' ' '		G. Special Distri	ct N. Other (Specify):	
A. Increase Award D. Decrease Duration	B. Decrease Award C. E. Other (specify):	. Increase Duration	9. NAME OF FEDE	DAL ACENCY	
D. Decrease Duration	L. Other (specify).	<u>.</u>	9. NAME OF FEDE	INAL AGENCI.	
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NO. 2 0 - 1 0 6 11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:			T:		
TITLE:					
12. AREAS AFFECTED BY PRO	OJECT (cities, counties, state	etc.):			
13. PROPOSED PROJECT 14. CONGRESSIONAL DISTRICTS OF:					
Start Date Ending	Date a. Applicant			b. Project	
15. ESTIMATED FUNDING:	1/	6. IS APPLICATION SUB	JECT TO REVIEW BY	STATE EXECUTIVE ORDER 123	72 PROCESS?
a. Federal	.00	a. YES. THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON:			
b. Applicant	.00	00 DATE			
c. State	.00	.00 b. NO. PROGRAM IS NOT COVERED BY E.O. 12372			
d. Local	.00	OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW			
e. Other	.00				
f. Program Income	.00	17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?			
g. TOTAL Yes, If "Yes", attach an explanation No					
18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED					
a. Typed Name of Authorize		AND THE APPLICANT W	b. Title	HE ATTACHED ASSURANCES IF	c. Telephone number
d. Signature of Authorized F	Representative				e. Date Signed

PART II

PROJECT APPROVAL INFORMATION SECTION A

Item 1. Does this assistance request requi	ires State, local,	Name of Governing Body	
regional, or other priority rating?		Priority Rating	
_	YesNo		
Item 2. Does this assistance request requiadvisory, educational or health cle		Name of Agency or Board	
	YesNo	(Attach Documentation)	
Item 3. Does this assistance request require accordance with OMB Circular A		(Attach Comments)	
_	YesNo		
Item 4. Does this assistance request requiregional or other planning approva	al?	Name of Approving Agency	
	YesNo		
Item 5. Is the proposal project covered comprehensive plan?	by an approvedYesNo	Check one: State	
Item 6.		Location of Fian	
Will the assistance requested servinstallation?		Name of Federal Installation	
	YesNo	Federal Population benefiting from Project	
Item 7. Will the assistance requested be continuous or installation?	on Federal landYesNo	Name of Federal Installation Location of Federal Land Percent of Project	
Item 8.		r crociit di i roject	
Will the assistance requested have on the environment?	e an impact or effectYesNo	See instruction for additional information to be provided	
Item 9.			
Will the assistance requested causindividuals, families, businesses, c		Number of: Individuals Families Businesses Farms	
Item 10. Ils there other related Federal assi project previous , pending, or antic—		See instructions for additional information to be provided.	

PART II - SECTION C

The Sponsor her	eby represents a	and certifies a	s follows:

FAA Form 5100-100 (4-76) Page 3a

^{*}State character of property interest in each area and list and identify for each all exceptions, encumbrances, and adverse interests of every kind and nature, including liens, easements, leases, etc. The separate areas of land need only be identified here by the area numbers shown on the property map.

PART II - SECTION C (Continued)

The Sponsor further certifies that the above is based on a title examination by a qualified attorney or title company and that such attorney or title company has determined that the Sponsor holds the above interests.

(b) The Sponsor will acquire within a reasonable time, but in any event prior to the start of any construction work under the Project, the following property interest in the following areas of land* on which such construction work is to be performed, all of which areas are identified on the aforementioned property map designated as Exhibit "A":

(c) The Sponsor will acquire within a reasonable time, and if feasible prior to the completion of all construction work under the Project, the following property interest in the following areas of land* which are to be developed or used as part of or in connection with the Airport as it will be upon completion of the Project, all of which areas are identified on the aforementioned property map designated as Exhibit "A":

5. Exclusive Rights. - There is no grant of an exclusive right for the conduct of any aeronautical activity at any airport owned or controlled by the Sponsor except as follows:

State character of property interest in each area and list and identify for each all exceptions, encumbrances, and adverse interests of every kind and nature, including liens, easements, leases, etc. The separate areas of land need only be identified here by the area numbers shown on the property map.

FAA Form 5100-100 (4-76) Page 3b

	PART III - BUDGET INFO	DRMATION - CONST	RUCTION	
	SECTION	I A - GENERAL		
1.	Federal Domestic Assistance Catalog No			
2.	Functional or Other Breakout			
	SECTION B -CALCULA	ATION OF FEDERAL	. GRANT	
	Use only for revisions			
	Cost Classification			Total
		Latest Approved Amount	Adjustment + or (-)	Amount Required
1.	Administration expense	\$	\$	\$
2.	Preliminary expense			
3.	Land, structures, right-of-way			
4.	Architectural engineering basic fees			
5.	Other Architectural engineering fees			
6.	Project inspection fees			
7.	Land development			
8.	Relocation Expenses			
9.	Relocation payments to Individuals and Businesses			
10	Demolition and removal			
11.	Construction and project improvement			
12.	Equipment			
13.	Miscellaneous			
14.	. Total (Lines 1 through 13)			
15.	. Estimated Income (if applicable)			
16.	. Net Project Amount (Line 14 minus 15)			
17.	Less: Ineligible Exclusions			
18.	Add: Contingencies			
19	. Total Project Amt. (Excluding Rehabilitation Grants)			
20.	Federal Share requested of Line 19			
21.	. Add Rehabilitation Grants Requested (100 Percent)			
22.	. Total Federal grant requested (Lines 20 & 21)			
23.	Grantee share			
24.	Other shares			
25.	. Total Project (Lines 22, 23 & 24)	\$	\$	\$

SECTION C - EXCLUSIONS				
Classification	Ineligible for Participation	Excluded From Contingency Provision (2)		
26	(1)			
a.	\$	\$		
b.				
C.				
d.				
e.				
f.				
g. Totals	\$	\$		
SECTION D - PROPOSED METHOD OF FINAN	ICING NON-FEDERAL	SHARE		
27. Grantee Share		\$		
a. Securities				
b. Mortgages				
c. Appropriations (By Applicant)				
d. Bonds				
e. Tax Levies				
f. Non Cash				
g. Other (Explain)				
h. TOTAL - Grantee share				
28. Other Shares				
a. State				
b. Other				
c. Total Other Shares				
29. TOTAL		\$		
SECTION E - REMA	RKS	1 4		
DADT IV DDOCDAM NADDATIVE (A44	nch - Soo Instructions			
PART IV PROGRAM NARRATIVE (Attach - See Instructions)				